(c) There are several factors*hieh influence accept economic, educational and

(d) The Action Plan under implementation covers improvement in quality of care and outreach of services, re-orientation of information, education and communication efforts, involving voluntary and NGOs in a big vv.'v to promote community participa-lion differential strategies for poor performing ar,,-as etc.

गुजरात में परिवार कल्याण कार्यक्रमों के लिए विश्व बैंक से सहायता

2287. **श्री अनन्तराय देवशंकर दवे** : क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या केन्द्र सरकार ने विश्व बैंक को गुजरात में परिवार कल्याण योजनाओं को सुचारु रूप से चलाने के लिए सहायता प्रदान करने के लिए कहा है;

(ख) यदि हां, तो तत्संबंधी ब्योरा क्या है; और

(ग) इस सहायता की राशि कितनी है और इसके कब तक प्राप्त होने की संभावना है ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य-मंत्री (डॉ० सी सिल्वेर.) : (क) से (ग) गुजरात में 2-11-90 से 5 वर्ष की अवधि के लिए 43.90 करोड़ रुपये की लागत से विश्व बैंक सहायता प्राप्त भारत जनसंख्या परियोजना--VII कार्यान्वित की जा रही है । इस परियोजना में पूरे राज्य को शामिल किया गया है । परियोजना के अधिन किए गए लग-भग 80 प्रतिशत खर्च की प्रतिपूर्ति विश्व बैंक द्वारा की जाती है ।

इसके अलावा, 1992-93 के दौरान विश्व बैंक की आंशिक सहायता से गुजरात सहित देश के सभी जिलों में "शिशु जीवन रक्षा और सुरक्षित मातृत्व" नामक एक अन्य कार्यक्रम शुरू किया गया है । सर-कार ने इस कार्यक्रम की 7 वर्ष की अवधि के लिए 1125.58 करोड़ रुपये के परिव्यय को स्वीकृति दी है । शिशु जीवन रक्षा और सुरक्षित मातृत्व कार्यक्रम के अधीन गुजरात सहित भाग लेने वाले सभी राज्यों के लिए वित्त पोषण विश्व बैंक द्वारा वास्तविक खर्च की प्रतिपूर्ति के आधार पर किया जाएगा ।

Expenditure incurred ou CGI IS

2288. MAULANA OBAIDULLAH KHAN AZMI : Will (he Minister ol HEALTH AND FAMILY WELFARE be pleased to state :

(a) the lotal expenditure incurred o;i Central Government Health Scheme (CGHS) during the last three years, year-wise;

(b) the expenditure incurred in different cities, city-wise during the above period;

(c) the provisions made for the current year for the CGHS;

(d) whether Government are taking steps to cut down the expenditure on CGHS; and

(e) if so, the details heretof ?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) The expenditure is shown below :—

	(Rs. in crores)
1991-92	80.59
1992-93	88.35
1993-94	118.87

(b) The details of city-wise expendtiure for the last three years is given in the attached statement *(Sec* below).

(c) Rs. 104.00 crores.

(d) No. Sir.

(e) Does not arise;

Statement

S. No.	Name of the City	1991-92	1992-93	1993-94
1.	Ahmedabad	77.27	86.01	99.20
2.	Allahabad	233.55	258.32	332.87
3.	Bangalore	223.64	280.67	324.24
4.	Mumbai	617.8	633.47	740.17
5.	Calcutta	528.68	561.28	596.71
6.	Delhi	3514.51	3830.81	5451.89
7.	Hyderabad	830.30	905.09	1638.72
8.	Jabalpur	21.37	52.11	78.50
9.	Jaipur	199.52	211.37	222.16
10.	Kanpur	248.78	226.56	373.95

Sl No.	Name of the City	1991-92	1992-93	1993-94
11.	Lucknow	190.17	186.49	382.31
12.	Madras	432.99	494.51	593.36
13.	Meerut	155.53	194.99	191.50
14.	Nagpur	256.32	290.92	322.16
15.	Patna	148.97	174.31	164.45
16.	Pune	371.89	448.01	375.30
	TOTAL :	8059.35	8834.92	11887.49

World AIDS Day, 1994

228?. SHRI TINDIVANAM fJ. VENKATARAMAN :
SHRI HIPHEI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether World AIDS D<»\' was observed on 1st December, 1994;

(b) if so, the details thereof with background for such celebration:

(c) whether Government have highlighted the factors responsible for spread of AIDS amongst the people on this day;

(d) if so, the details thereof; and if not, the reasons therfor;

(e) whether it is a fact that transmiss'on of the AIDS inducing HIV virus is shifting from high risk groups to low risk, groups of population of the count ry;

(f) whether a large number of people are suffering with AIDS;

(g) if so, the State and Territory-wise details thereof with preliminary symptoms;

(h) whether Government have announced some AIDS prevention measures on "World AIDS Day"; and

(i) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) and *(b)* Yes. Sir. A series of activities such as public meet-inns, seminars, allies by Government and non-Government Organisations were organised on the occasion of World AIDS Day—1994.

<*c)* and (d) Yes. Sir. The modes of transmision and manners of prevention were highlighted. The accent was on generation of awareness and knowledge in all these programmes.

(e) Yes, Sir. There are instances of per-. eolation of HIV infection from high-risk behav'ourer groups to others.

(f) and fg) 905 AIDS cases have been re-norted from the States/UTs as on 10-11-94. S+ate and Territroy-wise details are annexed as Statement *(See* he'ow). The nrerlnminent infections observed in these AIDS cases are tuberculosis and candidiasis (a fungal infection).

(h) and (i) A comprehensive national AIDS Control programme is currently under implementation throughout the country: The programme consist of generation of awareness amongst high risk behaviour groups and the general public prevention and control of STD. promotion of condom, use of prevention of STD, HIV. blood safety and rational use of blood and better facilities for surveillance, diagnosis and management of HIV/AIDS cases.

Statement

National Aids Control Programme. India

AWs Cases in India (Reported to NACO) (as on 30th November. 1994)

S. No.	State/Union Territory	AIDs Cases
1.	Andhara Pradesh	1
2.	Assam	2
3.	Delhi	61
4.	Goa	12
5.	Gujarat	18
6.	Haryana	1
7.	Himachal Pradesh	9
8.	Jammu & Kashmir	2
9.	Kerala	76
10.	Madhya Pradesh	21
11.	Maharashtra	280
12.	Manipur	68
13.	Pondicherry	6
14.	Punjab/Chandigarh	47
15.	Rajasthan	1
16.	Tamil Nadu	237
17.	Uttar Pradesh	8
18.	West Bengal	26
19.	Karnataka	26
20.	Dadra & Nagar Haveli	1
21.	Orissa	2
	TOTAL :	905

Quality Control in Blood Banks

2290. SHRI IQBAL SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state: